

Label (See instructions on page 21.) Use the IRS label. Otherwise, please print or type.	Label Here	For the year Jan. 1-Dec. 31, 2002, or other tax year beginning _____, 2002, ending _____, 20		OMB No. 1545-0074
		Your first name and initial JAMES R.	Last name PERRY	Your social security number
		If a joint return, spouse's first name and initial M. ANITA	Last name PERRY	Spouse's social security number
		Home address (number and street). If you have a P.O. box, see page 21. 1010 COLORADO		Apt. no.
City, town or post office, state, and ZIP code. If you have a foreign address, see page 21. AUSTIN, TX 78701				

Presidential Election Campaign (See page 21.) **Note.** Checking "Yes" will not change your tax or reduce your refund.
Do you, or your spouse if filing a joint return, want \$3 to go to this fund? **You** ☐ Yes ☐ No **Spouse** ☐ Yes ☐ No

Filing Status

1 <input type="checkbox"/> Single	4 <input type="checkbox"/> Head of household (with qualifying person). (See page 21.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶
2 <input checked="" type="checkbox"/> Married filing jointly (even if only one had income)	5 <input type="checkbox"/> Qualifying widow(er) with dependent child (year spouse died ▶). (See page 21.)
3 <input type="checkbox"/> Married filing separately. Enter spouse's SSN above and full name here. ▶	

Exemptions

6a ☒ Yourself. If your parent (or someone else) can claim you as a dependent on his or her tax return, **do not** check box 6a

b ☒ Spouse

(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> If qualifying child for child tax credit (see page 22)
GRIFFIN A.	PERRY		SON	
SYDNEY	PERRY		DAUGHTER	

No. of boxes checked on 6a and 6b: **2**

No. of your children on 6c who:

- ☒ lived with you **2**
- ☐ did not live with you due to divorce or separation (see page 22)

Dependents on 6c not entered above: **0**

d Total number of exemptions claimed: **4**

Income

7 Wages, salaries, tips, etc. Attach Form(s) W-2	7	104,243.
8a Taxable interest. Attach Schedule B if required	8a	50.
b Tax-exempt interest. Do not include on line 8a	8b	
9 Ordinary dividends. Attach Schedule B if required	9	7,064.
10 Taxable refunds, credits, or offsets of state and local income taxes	10	
11 Alimony received	11	
12 Business income or (loss). Attach Schedule C or C-EZ	12	
13 Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>	13	<3,000.>
14 Other gains or (losses). Attach Form 4797	14	
15a IRA distributions 15a 14,400.	b Taxable amount (see page 25)	15b 0.
16a Pensions and annuities 16a	b Taxable amount (see page 25)	16b
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17	13,786.
18 Farm income or (loss). Attach Schedule F	18	
19 Unemployment compensation	19	
20a Social security benefits 20a	b Taxable amount (see page 27)	20b
21 Other income. List type and amount (see page 29)	21	
22 Add the amounts in the far right column for lines 7 through 21. This is your total income	22	122,143.

Adjusted Gross Income

23 Educator expenses (see page 29)	23	
24 IRA deduction (see page 29)	24	
25 Student loan interest deduction (see page 31)	25	
26 Tuition and fees deduction (see page 32) STATEMENT 1	26	3,000.
27 Archer MSA deduction. Attach Form 8853	27	
28 Moving expenses. Attach Form 3903	28	
29 One-half of self-employment tax. Attach Schedule SE	29	64.
30 Self-employed health insurance deduction (see page 33)	30	
31 Self-employed SEP, SIMPLE, and qualified plans	31	
32 Penalty on early withdrawal of savings	32	
33a Alimony paid b Recipient's SSN ▶	33a	
34 Add lines 23 through 33a	34	3,064.
35 Subtract line 34 from line 22. This is your adjusted gross income	35	119,079.

TAXPAYER COPY

Tax and Credits

Standard Deduction for -

● People who checked any box on line 37a or 37b **or** who can be claimed as a dependent.

● All others:

Single, \$4,700

Head of household, \$6,900

Married filing jointly or Qualifying widow(er), \$7,850

Married filing separately, \$3,925

36	Amount from line 35 (adjusted gross income)	36	119,079.
37a	Check if: <input type="checkbox"/> You were 65 or older, <input type="checkbox"/> Blind; <input type="checkbox"/> Spouse was 65 or older, <input type="checkbox"/> Blind. Add the number of boxes checked above and enter the total here	37a	
b	If you are married filing separately and your spouse itemizes deductions, or you were a dual-status alien	37b	
38	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	38	11,845.
39	Subtract line 38 from line 36	39	107,234.
40	If line 36 is \$103,000 or less, multiply \$3,000 by the total number of exemptions claimed on line 6d. If line 36 is over \$103,000, see the worksheet on page 35	40	12,000.
41	Taxable income. Subtract line 40 from line 39. If line 40 is more than line 39, enter -0-	41	95,234.
42	Tax. Check if any tax from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972	42	19,507.
43	Alternative minimum tax. Attach Form 6251	43	
44	Add lines 42 and 43	44	19,507.
45	Foreign tax credit. Attach Form 1116 if required	45	
46	Credit for child and dependent care expenses. Attach Form 2441	46	
47	Credit for the elderly or the disabled. Attach Schedule R	47	
48	Education credits. Attach Form 8863	48	
49	Retirement savings contributions credit. Attach Form 8880	49	
50	Child tax credit (see page 39)	50	
51	Adoption credit. Attach Form 8839	51	
52	Credits from: a <input type="checkbox"/> Form 8396 b <input type="checkbox"/> Form 8859	52	
53	Other credits. Check applicable box(es): a <input type="checkbox"/> Form 3800 b <input type="checkbox"/> Form 8801 c <input type="checkbox"/> Specify	53	
54	Add lines 45 through 53. These are your total credits	54	
55	Subtract line 54 from line 44. If line 54 is more than line 44, enter -0-	55	19,507.
56	Self-employment tax. Attach Schedule SE	56	128.
57	Social security and Medicare tax on tip income not reported to employer. Attach Form 4137	57	
58	Tax on qualified plans, including IRAs, and other tax-favored accounts. Attach 5329 if required	58	
59	Advance earned income credit payments from Form(s) W-2	59	
60	Household employment taxes. Attach Schedule H	60	
61	Add lines 55 through 60. This is your total tax	61	19,635.
62	Federal income tax withheld from Forms W-2 and 1099	62	17,138.
63	2002 estimated tax payments and amount applied from 2001 return	63	7,723.
64	Earned income credit (EIC)	64	
65	Excess social security and tier 1 RRTA tax withheld (see page 56)	65	
66	Additional child tax credit. Attach Form 8812	66	
67	Amount paid with request for extension to file (see page 56)	67	
68	Other payments from: a <input type="checkbox"/> Form 2439 b <input type="checkbox"/> Form 4136 c <input type="checkbox"/> Form 8885	68	
69	Add lines 62 through 68. These are your total payments	69	24,861.
70	If line 69 is more than line 61, subtract line 61 from line 69. This is the amount you overpaid	70	5,226.
71a	Amount of line 70 you want refunded to you	71a	
b	Routing number	c	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
d	Account number		
72	Amount of line 70 you want applied to your 2003 estimated tax	72	5,226.
73	Amount you owe. Subtract line 69 from line 61. For details on how to pay, see page 57	73	
74	Estimated tax penalty (see page 57)	74	

Other Taxes**Payments**

If you have a qualifying child, attach Schedule EIC.

Refund

Direct deposit? See page 56 and fill in 71b, 71c, and 71d.

Amount You Owe**Third Party Designee**Do you want to allow another person to discuss this return with the IRS (see page 58)? ☒ Yes. Complete the following. ☐ NoDesignee's name **PREPARER** Phone no. **GOVERNOR** Personal identification number (PIN) **GOVERNOR****Sign Here**

Joint return? See page 21. Keep a copy for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature **JEFF MEADOR** Date **4-4-03** Your occupation **GOVERNOR** Daytime phone number **512-472-0795**

Spouse's signature. If a joint return, both must sign.

Date

Spouse's occupation

Paid Preparer's Use OnlyPreparer's signature **JEFF MEADOR CDA**Date **4-4-03**Check if self-employed ☐Preparer's SSN or PTIN **74 2984516**

Firm's name (or yours if self-employed), address, and ZIP code

JEFF MEADOR & ASSOCIATES, L.L.P.
2414 EXPOSITION BLVD, SUITE 230
AUSTIN, TX 78703EIN **74 2984516**
Phone no **512-472-0795**

SCHEDULES A&B
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)
Name(s) shown on Form 1040

Schedule A - Itemized Deductions
(Schedule B is on page 2)

▶ **Attach to Form 1040.** ▶ **See Instructions for Schedules A and B (Form 1040).**

OMB No. 1545-0074

2002

Attachment
Sequence No. **07**

Your social security number

JAMES R. & M. ANITA PERRY

Medical and Dental Expenses	Caution. Do not include expenses reimbursed or paid by others.		
1	Medical and dental expenses (see page A-2)	1	
2	Enter amount from Form 1040, line 36	2	
3	Multiply line 2 above by 7.5% (.075)	3	
4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-	4	
Taxes You Paid	5 State and local income taxes	5	
(See page A-2.)	6 Real estate taxes (see page A-2)	6	8,435.
	7 Personal property taxes	7	
	8 Other taxes. List type and amount	8	
	9 Add lines 5 through 8	9	8,435.
Interest You Paid	10 Home mortgage interest and points reported to you on Form 1098	10	
(See page A-3.)	11 Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see page A-3 and show that person's name, identifying no., and address	11	
Note: Personal interest is not deductible.	12 Points not reported to you on Form 1098. (See page A-3.)	12	
	13 Investment interest. Attach Form 4952 if required. (See page A-3.)	13	
	14 Add lines 10 through 13	14	
Gifts to Charity	15 Gifts by cash or check. If you made any gift of \$250 or more, see page A-4	15	1,616.
If you made a gift and got a benefit for it, see page A-4.	16 Other than by cash or check. If any gift of \$250 or more, see page A-4. You must attach Form 8283 if over \$500	16	1,794.
	17 Carryover from prior year	17	
	18 Add lines 15 through 17	18	3,410.
Casualty and Theft Losses	19 Casualty or theft loss(es). Attach Form 4684. (See page A-5.)	19	
Job Expenses and Most Other Miscellaneous Deductions	20 Unreimbursed employee expenses - job travel, union dues, job education, etc. You must attach Form 2106 or 2106-EZ if required. (See page A-5.)	20	
(See page A-5 for expenses to deduct here.)	21 Tax preparation fees	21	350.
	22 Other expenses - investment, safe deposit box, etc. List type and amount	22	
	23 Add lines 20 through 22	23	350.
	24 Enter amount from Form 1040, line 36	24	119,079.
	25 Multiply line 24 above by 2% (.02)	25	2,382.
	26 Subtract line 25 from line 23. If line 25 is more than line 23, enter -0-	26	0.
Other Miscellaneous Deductions	27 Other - from list on page A-6. List type and amount	27	
Total Itemized Deductions	28 Is Form 1040, line 36, over \$137,300 (over \$68,650 if married filing separately)? <input checked="" type="checkbox"/> No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 27. Also, enter this amount on Form 1040, line 38. <input type="checkbox"/> Yes. Your deduction may be limited. See page A-6 for the amount to enter.	28	11,845.

219501
10-25-02

LHA For Paperwork Reduction Act Notice, see Form 1040 instructions.

Schedule A (Form 1040) 2002

Name(s) shown on Form 1040. Do not enter name and social security number if shown on page 1.

Your social security number

JAMES R. & M. ANITA PERRY**Schedule B - Interest and Ordinary Dividends**Attachment
Sequence No. **08****Part I
Interest**

- 1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see page B-1 and list this interest first. Also, show that buyer's social security number and address ►

NATIONAL FARM LIFE INSURANCE COMPANYFROM K-1 - REVOCABLE "BLIND" TRUST AGREEMENT FBOANITA PERRY

Note: If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

1

Amount

35.

15.

- 2 Add the amounts on line 1

2

50.

- 3 Excludable interest on series EE and I U.S. savings bonds issued after 1989 from Form 8815, line 14. You **must** attach Form 8815

3

- 4 Subtract line 3 from line 2. Enter the result here and on Form 1040, line 8a ►

4

50.

Note. If line 4 is over \$1,500, you must complete Part III.**Part II
Ordinary
Dividends**

- 5 List name of payer. Include only ordinary dividends. If you received any capital gain distributions, see the instructions for Form 1040, line 13. ►

FIRST HASKELL BANCORP, INC.THE PHOENIX COMPANIES, INCTHE PHOENIX COMPANIES, INCFROM K-1 - REVOCABLE "BLIND" TRUST STATE AGREEMENTFBO RICK PERRY DTD 9-13-9

Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.

5

Amount

100.

3.

28.

6,933.

- 6 Add the amounts on line 5. Enter the total here and on Form 1040, line 9 ►

6

7,064.

Note. If line 6 is over \$1,500, you must complete Part III.**Part III
Foreign
Accounts
and
Trusts**

You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; OR (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

Yes No

- 7a At any time during 2002, did you have an interest in or a signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account?

X

- b If "Yes," enter the name of the foreign country ►

- 8 During 2002, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust?

If "Yes," you may have to file Form 3520. See page B-2

X

227501
10-25-02

LHA For Paperwork Reduction Act Notice, see Form 1040 instructions.

Schedule B (Form 1040) 2002

SCHEDULE D
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Name(s) shown on Form 1040

Capital Gains and Losses

► Attach to Form 1040.

► See Instructions for Schedule D (Form 1040).

OMB No. 1545-0074

2002

Attachment
Sequence No. **12**

Your social security number

JAMES R. & M. ANITA PERRY

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price	(e) Cost or other basis	(f) Gain or (loss) Subtract (e) from (d)	
1 ENT SMALL CO GROWTH 1.249 SHS	12/24/01	10/09/02	22.	33.	<11.>	
2 Enter your short-term totals 2						
3 Total short-term sales price amounts. Add lines 1 and 2 in column (d)			3	22.		
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824					4	
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 SEE STATEMENT 6					5	6,633.
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your 2001 Capital Loss Carryover Worksheet					6	()
7 Net short-term capital gain or (loss). Combine lines 1 through 6 in column (f).					7	6,622.

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price	(e) Cost or other basis	(f) Gain or (loss) Subtract (e) from (d)	(g) 28% rate gain or (loss) * (see instr. below)
8 ENT SMALL CO GROWTH 150.914 SH	VARIOUS	10/09/02	2,654.	4,798.	<2,144.>	
ENPR GROWTH CLASS C 216.715 SHS	VARIOUS	10/09/02	2,702.	4,758.	<2,056.>	
363.792 FEDERATED COMM	VARIOUS	10/09/02	968.	5,011.	<4,043.>	
500 MFS GLBL TELECOMMUN	06/19/00	10/09/02	885.	5,000.	<4,115.>	
9 Enter your long-term totals 9						
10 Total long-term sales price amounts. Add lines 8 and 9 in column (d)			10	7,209.		
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824					11	
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 SEE STATEMENT 7					12	<18,830.> <18,830.>
13 Capital gain distributions.					13	
14 Long-term capital loss carryover. Enter in both columns (f) and (g) the amount, if any, from line 13 of your 2001 Capital Loss Carryover Worksheet					14	() ()
15 Combine lines 8 through 14 in column (g)					15	<18,830.>
16 Net long-term capital gain or (loss). Combine lines 8 through 14 in column (f) Next: Go to Part III on page 2.					16	<31,188.>

* 28% rate gain or loss includes all "collectibles gains and losses" and up to 50% of the eligible gain on qualified small business stock. See instructions.

Part III Taxable Gain or Deductible Loss

17 Combine lines 7 and 16 and enter the result. If a loss, go to line 18. If a gain, enter the gain on Form 1040, line 13, and complete Form 1040 through line 41.....

17 <24,566.>

- Next:**
- If both lines 16 and 17 are gains and Form 1040, line 41, is more than zero, complete Part IV below.
 - Otherwise, skip the rest of Schedule D and complete Form 1040.

18 If line 17 is a loss, enter here and on Form 1040, line 13, the **smaller** of (a) that loss or (b) (\$3,000) (or, if married filing separately, (\$1,500)). Then complete Form 1040 through line 39.....

18 (3,000.)

- Next:**
- If the loss on line 17 is more than the loss on line 18 or if Form 1040, line 39, is less than zero, skip **Part IV** below and complete the **Capital Loss Carryover Worksheet** on page D-6 of the instructions before completing the rest of Form 1040.
 - Otherwise, skip **Part IV** below and complete the rest of Form 1040.

SEE STATEMENT 8

Part IV Tax Computation Using Maximum Capital Gains Rates

19 Enter your unrecaptured section 1250 gain, if any, from line 17 of the worksheet on page D-7 of the instructions.....

19

If line 15 or line 19 is more than zero, complete the worksheet on page D-9 of the instructions to figure the amount to enter on lines 22, 29, and 40 below, and skip all other lines below. Otherwise, go to line 20.

20 Enter your taxable income from Form 1040, line 41.....

20

21 Enter the **smaller** of line 16 or line 17 of Schedule D.....

21

22 If you are deducting investment interest expense on Form 4952, enter the amount from Form 4952, line 4e. Otherwise, enter -0-.....

22

23 Subtract line 22 from line 21. If zero or less, enter -0-.....

23

24 Subtract line 23 from line 20. If zero or less, enter -0-.....

24

25 Figure the tax on the amount on line 24. Use the Tax Table or Tax Rate Schedules, whichever applies.....

25

26 Enter the **smaller** of:

- The amount on line 20 or
- \$46,700 if married filing jointly or qualifying widow(er);
\$27,950 if single;
\$37,450 if head of household; or
\$23,350 if married filing separately

26

If line 26 is greater than line 24, go to line 27. Otherwise, skip lines 27 through 33 and go to line 34.

27 Enter the amount from line 24.....

27

28 Subtract line 27 from line 26. If zero or less, enter -0- and go to line 34.....

28

29 Enter your qualified 5-year gain, if any, from line 8 of the worksheet on page D-8.....

29

30 Enter the **smaller** of line 28 or line 29.....

30

31 Multiply line 30 by 8% (.08).....

31

32 Subtract line 30 from line 28.....

32

33 Multiply line 32 by 10% (.10).....

33

If the amounts on lines 23 and 28 are the same, skip lines 34 through 37 and go to line 38.

34 Enter the **smaller** of line 20 or line 23.....

34

35 Enter the amount from line 28 (if line 28 is blank, enter -0-).....

35

36 Subtract line 35 from line 34.....

36

37 Multiply line 36 by 20% (.20).....

37

38 Add lines 25, 31, 33, and 37.....

38

39 Figure the tax on the amount on line 20. Use the Tax Table or Tax Rate Schedules, whichever applies.....

39

40 Tax on all taxable income (including capital gains). Enter the **smaller** of line 38 or line 39 here and on Form 1040, line 42.....

40

SCHEDULE E
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Supplemental Income and Loss

(From rental real estate, royalties, partnerships,
S corporations, estates, trusts, REMICs, etc.)

▶ Attach to Form 1040 or Form 1041.

▶ See instructions for Schedule E (Form 1040).

OMB No. 1545-0074

2002

Attachment
Sequence No. **13**

Name(s) shown on return

Your social security number

JAMES R. & M. ANITA PERRY

Part I **Income or Loss From Rental Real Estate and Royalties** Note. If you are in the business of renting personal property, use Schedule C or C-EZ (see page E-3). Report farm rental income or loss from Form 4835 on page 2, line 39.

1	Show the kind and location of each rental real estate property:	2	For each rental real estate property listed on line 1, did you or your family use it during the tax year for personal purposes for more than the greater of: • 14 days or • 10% of the total days rented at fair rental value? (See page E-3.)	Yes	No
A	J.R. PERRY CO. - ROYALTY			A	
B				B	
C				C	

Income:		Properties			Totals
		A	B	C	(Add columns A, B, and C.)
3	Rents received	3			3
4	Royalties received	4	1,297.		4 1,297.
Expenses:					
5	Advertising	5			
6	Auto and travel (see page E-4)	6			
7	Cleaning and maintenance	7			
8	Commissions	8			
9	Insurance	9			
10	Legal and other professional fees	10			
11	Management fees	11			
12	Mortgage interest paid to banks, etc. (see page E-4)	12			12
13	Other interest	13			
14	Repairs	14			
15	Supplies	15			
16	Taxes	16			
17	Utilities	17			
18	Other (list) ▶	18			
19	Add lines 5 through 18	19			19
20	Depreciation expense or depletion (see page E-4)	20	204.		20 204.
21	Total expenses. Add lines 19 and 20	21	204.		
22	Income or (loss) from rental real estate or royalty properties. Subtract line 21 from line 3 (rents) or line 4 (royalties). If the result is a (loss), see page E-5 to find out if you must file Form 6198	22	1,093.		
23	Deductible rental real estate loss. Caution. Your rental real estate loss on line 22 may be limited. See page E-5 to find out if you must file Form 8582. Real estate professionals must complete line 42 on page 2	23			
24	Income. Add positive amounts shown on line 22. Do not include any losses	24			24 1,093.
25	Losses. Add royalty losses from line 22 and rental real estate losses from line 23. Enter total losses here	25			25 ()
26	Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 39 on page 2 do not apply to you, also enter this amount on Form 1040, line 17. Otherwise, include this amount in the total on line 40 on page 2	26			26 1,093.

Name(s) shown on return. Do not enter name and social security number if shown on page 1.

Your social security number

JAMES R. & M. ANITA PERRY**Note:** If you report amounts from farming or fishing on Schedule E, you must enter your gross income from those activities on line 41 below.

Real estate professionals must complete line 42 below.

Part II Income or Loss From Partnerships and S Corporations **Note.** If you report a loss from an at-risk activity, you must check either column (e) or (f) on line 27 to describe your investment in the activity. If you check column (f), you must attach Form 6198.

27	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) All is at risk	(f) Some is not at risk
A	J.R. PERRY CO.	P		75-1642655	X	
B						
C						
D						
E						

Passive Income and Loss			Nonpassive Income and Loss		
(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss from Schedule K-1	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1	
A				3,597.	
B					
C					
D					
E					
28a Totals				3,597.	
b Totals					
29 Add columns (h) and (k) of line 28a				3,597.	29
30 Add columns (g), (i), and (j) of line 28b				()	30
31 Total partnership and S corporation income or (loss). Combine lines 29 and 30. Enter the result here and include in the total on line 40 below				3,597.	31

Part III Income or Loss From Estates and Trusts

32		(a) Name		(b) Employer identification number	
A	SEE STATEMENT 9				
B					
Passive Income and Loss				Nonpassive Income and Loss	
(c) Passive deduction or loss allowed (attach Form 8582 if required)		(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1	
A					
B					
33a	Totals		9,096.		
b	Totals				
34	Add columns (d) and (f) of line 33a			34	9,096.
35	Add columns (c) and (e) of line 33b			35	()
36	Total estate and trust income or (loss). Combine lines 34 and 35. Enter the result here and include in the total on line 40 below			36	9,096.

Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder

37	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
38	Combine columns (d) and (e) only. Enter the result here and include in the total on line 40 below				38

Part V Summary

39	Net farm rental income or (loss) from Form 4835. Also, complete line 41 below	39	
40	Total income or (loss). Combine lines 26, 31, 36, 38, and 39. Enter the result here and on Form 1040, line 17	40	13,786.
41	Reconciliation of Farming and Fishing Income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), line 15b; Schedule K-1 (Form 1120S), line 23; and Schedule K-1 (Form 1041), line 14 (see page E-6)	41	
42	Reconciliation for Real Estate Professionals. If you were a real estate professional, enter the net income or (loss) you reported anywhere on Form 1040 from all rental real estate activities in which you materially participated under the passive activity loss rules	42	

2002 Income from Passthroughs

J.R. PERRY CO.
I.D. NUMBER: 75-1642655
TYPE: PARTNERSHIP

ACTIVITY INFORMATION:

J.R. PERRY CO.

TRADE OR BUSINESS - MATERIAL PARTICIPATION

ORDINARY INCOME (LOSS)	4,789
PERCENTAGE DEPLETION	-1,192

SCHEDULE E ACTIVITY INCOME (LOSS)	<u>3,597</u>
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TAX PREFERENCE ITEMS:

OTHER K-1 INFORMATION:

ROYALTIES	1,297
CONTRIBUTIONS - 50% LIMITATION	66
SELF-EMPLOYMENT EARNINGS (LOSS)	4,789
INVESTMENT INCOME	1,297

2002 Income from Passthroughs

REVOCABLE "BLIND" TRUST STATE AGREEMENT FBO RICK PERRY DTD 9-13-96
I.D. NUMBER:
TYPE: ESTATE OR TRUST

ACTIVITY INFORMATION:

REVOCABLE "BLIND" TRUST STATE AGREEMENT FBO RICK PERRY DTD 9-13-

OIL & GAS WORKING INTEREST	18,140
PERCENTAGE DEPLETION	-7,877
LEGAL AND PROFESSIONAL FEES	-1,167

SCHEDULE E ACTIVITY INCOME (LOSS)	<u>9,096</u>
-----------------------------------	--------------

TAX PREFERENCE ITEMS:

OTHER K-1 INFORMATION:

DIVIDENDS - TOTAL	6,933
SHORT-TERM CAPITAL GAIN (LOSS)	6,633
LONG-TERM CAPITAL GAIN (LOSS)	-18,830

2002 Income from Passthroughs

REVOCABLE "BLIND" TRUST AGREEMENT FBO ANITA PERRY
I.D. NUMBER: 03-6092780
TYPE: ESTATE OR TRUST

ACTIVITY INFORMATION:

REVOCABLE "BLIND" TRUST AGREEMENT FBO ANITA PERRY

OTHER K-1 INFORMATION:

INTEREST - TOTAL

15

2002 Income from Passthroughs

SUMMARY OF K-1 INFORMATION FOR ALL PASSTHROUGHS

OTHER K-1 INFORMATION:

INTEREST - TOTAL	15
DIVIDENDS - TOTAL	6,933
ROYALTIES	1,297
SHORT-TERM CAPITAL GAIN (LOSS)	6,633
LONG-TERM CAPITAL GAIN (LOSS)	-18,830
SELF-EMPLOYMENT EARNINGS (LOSS) (CALCULATED)	4,789

DEDUCTIONS:

CONTRIBUTIONS - 50% LIMITATION	66
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INVESTMENT INTEREST EXPENSE:

INVESTMENT INCOME	1,297
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TAX PREFERENCE ITEMS:

Schedule E			PASSTHROUGH RECAP - BASIC INFORMATION											2002	
JAMES R. & M. ANITA PERRY															
TYP SP JE	Schedule K-1 Line Reference: (1065/1120S/1041)			1/1/6a	2/2/6a	3/3/6a	*	*	4a/4a/1	*	4b/4b/2	4c/4c/5a	4d/4d/3	4e/4e/4c	5/*/*
	Entity No.	Act. No.	Name	Ordinary Income (Loss)	Rental Real Estate Inc. (Loss)	Other Rental Income (Loss)	Passive Activity Loss C/O	AMT Passive Activity Loss C/O	Interest	US Treasury Bond Interest	Dividends	Royalties	Short-Term Capital Gain (Loss)	Net Long- Term Capital Gain (Loss)	Guaranteed Payments to Partner
TP	1	1	J.R. PERRY CO.	4,789.								1,297.			
TE	3	3	REVOCABLE "BLIND" TRUST STATE A								6,933.		6,633.		
TE	4	4	REVOCABLE "BLIND" TRUST AGREEME						15.						
Totals.....				4,789.					15.		6,933.	1,297.	6,633.		
Component of:				Schedule E, Page 2, Various	Schedule E, Page 2, Various	Schedule E, Page 2, Various	Form 8582 Line 3c	Form 8582 AMT, Line 3c	Schedule B, Line 1	Schedule B, Line 1	Schedule B, Line 5	Schedule E, Line 4	Schedule D, Line 5	Schedule D, Line 12	Schedule E, Page 2, Various

Schedule E		PASSTHROUGH RECAP - ADDITIONAL INFORMATION AND PRIOR YEAR AT-RISK CARRYOVERS														2002	
JAMES R. & M. ANITA PERRY																	
Schedule K-1 Line Reference: (1065/1120S/1041) 4e/4e/4a * * * */*/14a 12b/12c/* 13/12a/* 13/13/* 13/13/* 13/13/* 13/13/* 16c/14c/* 16e/14e/* 16e/14e/* 16e/14e/* 16e/14e/*																	
Entity No.	Act. No.	Net LT Capital Gain (Loss) 28%	Form 4684 Casualty or Theft Gain (Loss)	Federal Income Tax Withheld	State Income Tax Withheld	Estimated Tax Paid by a Trust	Qualified Rehabilitation Expenditures Credit	Alcohol Fuel Credit	Non-conventional Source Fuel Credit	Patrons Credit	Welfare to Work Credit	Work Opportunity Credit	Form 6251 Depletion (Not Oil and Gas)	Form 6251 Interest Deduction Adjustments	Form 5251 Incentive Stock Options	Form 6251 Passive Activities	Form 6251 Tax-exempt Interest P.A. Bonds
3	3	<18,830.>															
Totals		<18,830.>															
Component of:		Schedule D, Line 12	Form 4684, Section B	Form 1040, Line 62	Schedule A, Line 5	Form 1040, Line 63	Form 3468, Line 1	Form 3800, Line 1d	Form 1040, Line 54	Form 5884, Line 3	Form 5884, Line 3	Form 5884, Line 3	Form 6251, Line 9	Form 6251, Line 8	Form 6251, Line 13	Form 6251, Line 18	Form 6251, Line 11

Name of person with self-employment income (as shown on Form 1040)

Social security number of person with self-employment income

JAMES R. PERRY

Section B - Long Schedule SE

Part I Self-Employment Tax

Note: If your only income subject to self-employment tax is church employee income, skip lines 1 through 4b. Enter -0- on line 4c and go to line 5a. Income from services you performed as a minister or a member of a religious order is not church employee income. See page SE-1.

<p>A If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361, but you had \$400 or more of other net earnings from self-employment, check here and continue with Part I <input type="checkbox"/></p>			
1	Net farm profit or (loss) from Schedule F, line 36, and farm partnerships, Schedule K-1 (Form 1065), line 15a. Note. Skip this line if you use the farm optional method. See page SE-3	1	
2	Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), line 15a (other than farming); and Schedule K-1 (Form 1065-B), box 9. Ministers and members of religious orders, see page SE-1 for amounts to report on this line. See page SE-2 for other income to report. Note. Skip this line if you use the nonfarm optional method. See page SE-4	2	4,789.
3	Combine lines 1 and 2	3	4,789.
4a	If line 3 is more than zero, multiply line 3 by 92.35% (.9235). Otherwise, enter amount from line 3	4a	4,423.
4b	If you elect one or both of the optional methods, enter the total of lines 15 and 17 here	4b	
4c	Combine lines 4a and 4b. If less than \$400, do not file this schedule; you do not owe self-employment tax. Exception. If less than \$400 and you had church employee income, enter -0- and continue	4c	4,423.
5a	Enter your church employee income from Form W-2. Caution. See page SE-1 for definition of church employee income	5a	
5b	Multiply line 5a by 92.35% (.9235). If less than \$100, enter -0-	5b	
6	Net earnings from self-employment. Add lines 4c and 5b	6	4,423.
7	Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2002	7	84,900.00
8a	Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation	8a	84,900.
8b	Unreported tips subject to social security tax (from Form 4137, line 9)	8b	
8c	Add lines 8a and 8b	8c	84,900.
9	Subtract line 8c from line 7. If zero or less, enter -0- here and on line 10 and go to line 11	9	0.
10	Multiply the smaller of line 6 or line 9 by 12.4% (.124)	10	0.
11	Multiply line 6 by 2.9% (.029)	11	128.
12	Self-employment tax. Add lines 10 and 11. Enter here and on Form 1040, line 56	12	128.
13	Deduction for one-half of self-employment tax. Multiply line 12 by 50% (.5). Enter the result here and on Form 1040, line 29	13	64.

Part II Optional Methods To Figure Net Earnings (See page SE-3.)

Farm Optional Method. You may use this method only if:

- Your gross farm income¹ was not more than \$2,400 or
- Your net farm profits² were less than \$1,733.

14	Maximum income for optional methods	14	1,600.00
15	Enter the smaller of: two-thirds (2/3) of gross farm income ¹ (not less than zero) or \$1,600. Also include this amount on line 4b above	15	

Nonfarm Optional Method. You may use this method only if:

- Your net nonfarm profits³ were less than \$1,733 and also less than 72.189% of your gross nonfarm income⁴ and
- You had net earnings from self-employment of at least \$400 in 2 of the prior 3 years.

Caution: You may use this method no more than five times.

16	Subtract line 15 from line 14	16	
17	Enter the smaller of: two-thirds (2/3) of gross nonfarm income ⁴ (not less than zero) or the amount on line 16. Also include this amount on line 4b above	17	

¹ From Sch. F, line 11, and Sch. K-1 (Form 1065), line 15b.

² From Sch. F, line 36, and Sch. K-1 (Form 1065), line 15a.

³ From Sch. C, line 31; Sch. C-EZ, line 3; Sch. K-1 (Form 1065), line 15a; and Sch. K-1 (Form 1065-B), box 9.

⁴ From Sch. C, line 7; Sch. C-EZ, line 1; Sch. K-1 (Form 1065), line 15c; and Sch. K-1 (Form 1065-B), box 9.

Foreign Tax Credit
(Individual, Estate, or Trust)
▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

Name JAMES R. & M. ANITA PERRY Identifying number as shown on page 1 of your tax return

JAMES R. & M. ANITA PERRY

Use a separate Form 1116 for each category of income listed below. See **Categories of Income** on page 3 of the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- | | | |
|--|---|--|
| a <input checked="" type="checkbox"/> Passive income | d <input type="checkbox"/> Shipping income | g <input type="checkbox"/> Lump-sum distributions |
| b <input type="checkbox"/> High withholding tax interest | e <input type="checkbox"/> Dividends from a DISC or former DISC | h <input type="checkbox"/> Section 901(j) income |
| c <input type="checkbox"/> Financial services income | f <input type="checkbox"/> Certain distributions from a foreign sales corporation (FSC) or former FSC | i <input type="checkbox"/> Certain income re-sourced by treaty |
| | | j <input type="checkbox"/> General limitation income |

k Resident of (name of country) ▶ UNITED STATES

Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.

Part I Taxable Income or Loss From Sources Outside the United States (for Category Checked Above)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
l Enter the name of the foreign country or U.S. possession ▶ OTHER COUNTRIES				
1 Gross income from sources within country shown above and of the type checked above:				1
Deductions and losses (Caution: See pages 9, 12, and 13 of the instructions):				
2 Expenses definitely related to the income on line 1 (attach statement)				
3 Pro rata share of other deductions not definitely related :				
a Certain itemized deductions or standard deduction	11,845.			
b Other deductions (attach statement)				
c Add lines 3a and 3b	11,845.			
d Gross foreign source income				
e Gross income from all sources	133,172.			
f Divide line 3d by line 3e	.000000			
g Multiply line 3c by line 3f				
4 Pro rata share of interest expense:				
a Home mortgage interest (use worksheet on page 12 of the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5				6
7 Subtract line 6 from line 1. Enter the result here and on line 14, page 2				7

Part II Foreign Taxes Paid or Accrued

Country	Credit is claimed for taxes (you must check one) (m) <input checked="" type="checkbox"/> Paid (n) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued						(w) Other foreign taxes paid or accrued	(x) Total foreign taxes paid or accrued (add cols. (t) through (w))		
		In foreign currency			In U.S. dollars						
		Taxes withheld at source on:			Taxes withheld at source on:						
		(o) Date paid or accrued	(p) Dividends	(q) Rents and royalties	(r) Interest	(s) Other foreign taxes paid or accrued	(t) Dividends	(u) Rents and royalties	(v) Interest		
A	12/31/02					8.				8.	8.
B											
C											
8										8.	8.

8 Add lines A through C, column (x). Enter the total here and on line 9, page 2

Part III Figuring the Credit

9 Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	8.	
10 Carryback or carryover (attach detailed computation)	10		
11 Add lines 9 and 10	11	8.	
12 Reduction in foreign taxes	12		
13 Subtract line 12 from line 11. This is the total amount of foreign taxes available for credit	13		8.
14 Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I.	14		
15 Adjustments to line 14	15		
16 Combine the amounts on lines 14 and 15. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 17 through 21. However, if you are filing more than one Form 1116, you must complete line 19.)	16		
17 Individuals: Enter the amount from Form 1040, line 39. If you are a nonresident alien, enter the amount from Form 1040NR, line 37. Estates and trusts: Enter your taxable income without the deduction for your exemption <i>Caution: If you figured your tax using the special rates on capital gains, see instructions.</i>	17		
18 Divide line 16 by line 17. If line 16 is more than line 17, enter "1"	18		
19 Individuals: Enter the amount from Form 1040, line 42. If you are a nonresident alien, enter the amount from Form 1040NR, line 40. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37 <i>Caution: If you are completing line 19 for separate category g (lump-sum distributions), see page 15 of the instructions</i>	19		
20 Multiply line 19 by line 18 (maximum amount of credit)	20		
21 Enter the smaller of line 13 or line 20. If this is the only Form 1116 you are filing, skip lines 22 through 30 and enter this amount on line 31. Otherwise, complete the appropriate line in Part IV.	21		0.

Part IV Summary of Credits From Separate Parts III

22 Credit for taxes on passive income	22		
23 Credit for taxes on high withholding tax interest	23		
24 Credit for taxes on financial services income	24		
25 Credit for taxes on shipping income	25		
26 Credit for taxes on dividends from a DISC or former DISC and certain distributions from a FSC or former FSC	26		
27 Credit for taxes on lump-sum distributions	27		
28 Credit for taxes on certain income re-sourced by treaty	28		
29 Credit for taxes on general limitation income	29		
30 Add lines 22 through 29	30		0.
31 Enter the smaller of line 19 or line 30	31		0.
32 Reduction of credit for international boycott operations.	32		
33 Subtract line 32 from line 31. This is your foreign tax credit . Enter here and on Form 1040, line 45; Form 1040NR, line 43; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a	33		0.

Form **1116** (2002)

**ALTERNATIVE MINIMUM TAX
Foreign Tax Credit**

(Individual, Estate, or Trust)
▶ Attach to Form 1040, 1040NR, 1041, or 990-T.

OMB No. 1545-0121

2002

Attachment
Sequence No. **19**

Name _____ Identifying number as shown on page 1 of your tax return _____

JAMES R. & M. ANITA PERRY

Use a separate Form 1116 for each category of income listed below. See **Categories of Income** on page 3 of the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- | | | |
|---|--|---|
| a <input checked="" type="checkbox"/> Passive income | d <input type="checkbox"/> Shipping income | g <input type="checkbox"/> Lump-sum distributions |
| b <input type="checkbox"/> High withholding tax interest | e <input type="checkbox"/> Dividends from a DISC or former DISC | h <input type="checkbox"/> Section 901(j) income |
| c <input type="checkbox"/> Financial services income | f <input type="checkbox"/> Certain distributions from a foreign sales corporation (FSC) or former FSC | i <input type="checkbox"/> Certain income re-sourced by treaty |
| | | j <input type="checkbox"/> General limitation income |

k Resident of (name of country) ▶ **UNITED STATES**

Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.

Part I Taxable Income or Loss From Sources Outside the United States (for Category Checked Above)

	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
	A	B	C	
1 Enter the name of the foreign country or U.S. possession OTHER COUNTRIES				
1 Gross income from sources within country shown above and of the type checked above:				1
Deductions and losses (Caution: See pages 9, 12, and 13 of the instructions):				
2 Expenses definitely related to the income on line 1 (attach statement)				
3 Pro rata share of other deductions not definitely related :				
a Certain itemized deductions or standard deduction	3,410.			
b Other deductions (attach statement)				
c Add lines 3a and 3b	3,410.			
d Gross foreign source income				
e Gross income from all sources	133,172.			
f Divide line 3d by line 3e	.000000			
g Multiply line 3c by line 3f				
4 Pro rata share of interest expense:				
a Home mortgage interest (use worksheet on page 12 of the instructions)				
b Other interest expense				
5 Losses from foreign sources				
6 Add lines 2, 3g, 4a, 4b, and 5				6
7 Subtract line 6 from line 1. Enter the result here and on line 14, page 2				7

Part II Foreign Taxes Paid or Accrued

Country	Credit is claimed for taxes (you must check one) (m) <input checked="" type="checkbox"/> Paid (n) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued						(x) Total foreign taxes paid or accrued (add cols. (t) through (w))	
		In foreign currency			In U.S. dollars				
		Taxes withheld at source on:			Taxes withheld at source on:				
		(p) Dividends	(q) Rents and royalties	(r) Interest	(s) Other foreign taxes paid or accrued	(t) Dividends	(u) Rents and royalties	(v) Interest	(w) Other foreign taxes paid or accrued
A 12/31/02					8.				8.
B									
C									
8 Add lines A through C, column (x). Enter the total here and on line 9, page 2									8.

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **1116** (2002)

ALTERNATIVE MINIMUM TAX

Form 1116 (2002) **JAMES R. & M. ANITA PERRY**

Page **2**

Part III Figuring the Credit

9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	8.
10	Carryback or carryover (attach detailed computation)	10	
11	Add lines 9 and 10	11	8.
12	Reduction in foreign taxes	12	
13	Subtract line 12 from line 11. This is the total amount of foreign taxes available for credit	13	8.
14	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I.	14	
15	Adjustments to line 14	15	
16	Combine the amounts on lines 14 and 15. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 17 through 21. However, if you are filing more than one Form 1116, you must complete line 19.)	16	
17	Individuals: Enter the amount from Form 1040, line 39. If you are a nonresident alien, enter the amount from Form 1040NR, line 37. Estates and trusts: Enter your taxable income without the deduction for your exemption <i>Caution: If you figured your tax using the special rates on capital gains, see instructions.</i>	17	
18	Divide line 16 by line 17. If line 16 is more than line 17, enter "1"	18	
19	Individuals: Enter the amount from Form 1040, line 42. If you are a nonresident alien, enter the amount from Form 1040NR, line 40. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37 <i>Caution: If you are completing line 19 for separate category g (lump-sum distributions), see page 15 of the instructions</i>	19	
20	Multiply line 19 by line 18 (maximum amount of credit)	20	
21	Enter the smaller of line 13 or line 20. If this is the only Form 1116 you are filing, skip lines 22 through 30 and enter this amount on line 31. Otherwise, complete the appropriate line in Part IV.	21	0.

Part IV Summary of Credits From Separate Parts III

22	Credit for taxes on passive income	22	
23	Credit for taxes on high withholding tax interest	23	
24	Credit for taxes on financial services income	24	
25	Credit for taxes on shipping income	25	
26	Credit for taxes on dividends from a DISC or former DISC and certain distributions from a FSC or former FSC	26	
27	Credit for taxes on lump-sum distributions	27	
28	Credit for taxes on certain income re-sourced by treaty	28	
29	Credit for taxes on general limitation income	29	
30	Add lines 22 through 29	30	0.
31	Enter the smaller of line 19 or line 30	31	0.
32	Reduction of credit for international boycott operations.	32	
33	Subtract line 32 from line 31. This is your foreign tax credit . Enter here and on Form 1040, line 45; Form 1040NR, line 43; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a	33	0.

Form **1116** (2002)

211511
11-11-02

Noncash Charitable Contributions

► Attach to your tax return if you claimed a total deduction
of over \$500 for all contributed property.

OMB. No. 1545-0908

Attachment
Sequence No. **55**

Name(s) shown on your income tax return

Identifying number

JAMES R. & M. ANITA PERRY

Note: Figure the amount of your contribution deduction before completing this form. See your tax return instructions.

Section A - List in this section **only** items (or groups of similar items) for which you claimed a deduction of \$5,000 or less. Also, list certain publicly traded securities even if the deduction is over \$5,000 (see instructions).

Part I Information on Donated Property - If you need more space, attach a statement.

1	(a) Name and address of the donee organization	(b) Description of donated property
A	GOODWILL INDUSTRIES 300 NORTH LAMAR, AUSTIN, TX 78703	CLOTHES & SHOES
B		
C		
D		
E		

Note: If the amount you claimed as a deduction for an item is \$500 or less, you do not have to complete columns (d), (e), and (f).

	(c) Date of the contribution	(d) Date acquired by donor (mo., yr.)	(e) How acquired by donor	(f) Donor's cost or adjusted basis	(g) Fair market value	(h) Method used to determine the fair market value
A	12/31/02	VAR.	PURCHASE	8,970.	1,794.	THRIFT SHOP VALUE
B						
C						
D						
E						

Part II Other Information - Complete line 2 if you gave less than an entire interest in property listed in Part I.
Complete line 3 if conditions were attached to a contribution listed in Part I.

- 2 If, during the year, you contributed less than the entire interest in the property, complete lines a - e.
- a Enter the letter from Part I that identifies the property ► . If Part II applies to more than one property, attach a separate statement.
- b Total amount claimed as a deduction for the property listed in Part I: (1) For this tax year ► .
(2) For any prior tax years ► .
- c Name and address of each organization to which any such contribution was made in a prior year (complete only if different from the donee organization above):
Name of charitable organization (donee)

Address (number, street, and room or suite no.)

City or town, state, and ZIP code

- d For tangible property, enter the place where the property is located or kept ►
- e Name of any person, other than the donee organization, having actual possession of the property ►
- 3 If conditions were attached to any contribution listed in Part I, answer questions a - c and attach the required statement (see instructions).
- a Is there a restriction, either temporary or permanent, on the donee's right to use or dispose of the donated property?
- b Did you give to anyone (other than the donee organization or another organization participating with the donee organization in cooperative fundraising) the right to the income from the donated property or to the possession of the property, including the right to vote donated securities, to acquire the property by purchase or otherwise, or to designate the person having such income, possession, or right to acquire?
- c Is there a restriction limiting the donated property for a particular use?

Yes	No

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 8283 (Rev. 10-98)

Passive Activity Loss Limitations

▶ See separate instructions.
▶ Attach to Form 1040 or 1041.

OMB No. 1545-1008

2002
Attachment
Sequence No. **88**

Name(s) shown on return

Identifying number

JAMES R. & M. ANITA PERRY

Part I 2002 Passive Activity Loss Caution: See the instructions for Worksheets 1, 2, and 3 on pages 7 and 8 before completing Part I.

Rental Real Estate Activities With Active Participation (For the definition of active participation see

Special Allowance for Rental Real Estate Activities on page 3 of the instructions.)

1a Activities with net income (enter the amount from Worksheet 1, column (a))	1a		1d
b Activities with net loss (enter the amount from Worksheet 1, column (b))	1b		
c Prior years unallowed losses (enter the amount from Worksheet 1, column (c))	1c		
d Combine lines 1a, 1b, and 1c			

Commercial Revitalization Deductions From Rental Real Estate Activities

2a Commercial revitalization deductions from Worksheet 2, column (a)	2a		2c
b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)	2b		
c Add lines 2a and 2b			

All Other Passive Activities

3a Activities with net income (enter the amount from Worksheet 3, column (a))	3a	9,096.	3d
b Activities with net loss (enter the amount from Worksheet 3, column (b))	3b		
c Prior years unallowed losses (enter the amount from Worksheet 3, column (c))	3c		
d Combine lines 3a, 3b, and 3c			9,096.

4 Combine lines 1d, 2c, and 3d. If the result is net income or zero, all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Do not complete Form 8582. Report the losses on the forms and schedules normally used	4	9,096.
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- If line 4 is a loss and:
- Line 1d is a loss, go to Part II.
 - Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.
 - Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or III. Instead, go to line 15.

Part II Special Allowance for Rental Real Estate With Active Participation

Note: Enter all numbers in Part II as positive amounts. See page 8 for an examples.

5 Enter the smaller of the loss on line 1d or the loss on line 4	5	
6 Enter \$150,000. If married filing separately, see the instructions	6	
7 Enter modified adjusted gross income, but not less than zero (see the instr.)	7	
Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.		
8 Subtract line 7 from line 6	8	
9 Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filing separately, see the instructions	9	
10 Enter the smaller of line 5 or line 9	10	
If line 2c is a loss, go to Part III. Otherwise, go to line 15.		

Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities

Note: Enter all numbers in Part III as positive amounts. See the example for Part II on page 8.

11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions	11	
12 Enter the loss from line 4	12	
13 Reduce line 12 by the amount on line 10	13	
14 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13	14	

Part IV Total Losses Allowed

15 Add the income, if any, on lines 1a and 3a and enter the total	15	
16 Total losses allowed from all passive activities for 2002. Add lines 10, 14, and 15. See the instructions to find out how to report the losses on your tax return	16	

Form 1116

U.S. and Foreign Source Income Summary

NAME

JAMES R. & M. ANITA PERRY

INCOME TYPE	TOTAL	U.S.	FOREIGN PASSIVE
Compensation	104,243.	104,243.	
Dividends/Distributions	7,064.	7,064.	
Interest	50.	50.	
Capital Gains	6,633.	6,633.	
Business/Profession			
Rent/Royalty	1,297.	1,297.	
State/Local Refunds			
Partnership/S Corporation	4,789.	4,789.	
Trust/Estate	9,096.	9,096.	
Other Income			
Nontaxable Income			
Gross Income	133,172.	133,172.	
Less:			
Section 911 Exclusion			
Capital Losses	9,633.	9,633.	
Capital Gains Tax Adjustment			
Nontaxable Income			
Total Income - Form 1116	123,539.	123,539.	
Deductions:			
Business/Profession Expenses	1,192.	1,192.	
Rent/Royalty Expenses	204.	204.	
Partnership/S Corporation Losses			
Trust/Estate Losses			
Capital Losses			
Non-capital Losses			
Individual Retirement Account			
Moving Expenses			
Self-employment Tax Deduction	64.	64.	
Self-employment Health Insurance			
Keogh Contributions			
Alimony			
Forfeited Interest			
Foreign Housing Deduction			
Other Adjustments	3,000.	3,000.	
Capital Gains Tax Adjustment			
Total Deductions	4,460.	4,460.	
Adjusted Gross Income	119,079.	119,079.	
Less Itemized Deductions:			
Specifically Allocated			
Home Mortgage Interest			
Other Interest			
Ratably Allocated	11,845.	11,845.	
Total Adjustments to Adjusted Gross Income	11,845.	11,845.	
Taxable Income Before Exemptions	107,234.	107,234.	

NAME

JAMES R. & M. ANITA PERRY

Foreign Income Category

PASSIVE INCOME

Regular

	1997	1998	1999	2000	2001	2002
1. Foreign tax paid/accrued						8.
2. FTC Carryback to 2002 for amended returns						
3. Red alloc to excl inc.						
4. Foreign tax available						8.
5. Maximum credit allowable						0.
6. Unused foreign tax (+) or excess of limit (-) ...						8.
7. Foreign tax c/b						
8. Foreign tax c/f						
9. Less Treaty Adj						
10. Frgn tx or excess limit rem						8.
Total foreign taxes from all available years to be carried to next year						8.

Alternative Minimum

1. Foreign tax paid/accrued						8.
2. FTC Carryback to 2002 for amended returns						
3. Red alloc to excl inc.						
4. Foreign tax available						8.
5. Maximum credit allowable						0.
6. Unused foreign tax (+) or excess of limit (-) ...						8.
7. Foreign tax c/b						
8. Foreign tax c/f						
9. Less Treaty Adj						
10. Frgn tx or excess limit rem						8.
Total foreign taxes from all available years to be carried to next year						8.

Depletion		65% of Taxable Income Allocation						2002	
JAMES R. & M. ANITA PERRY									
Taxable income including all available NOL carryover		95,234.							
Plus allowable depletion		204.							
Minus cost depletion									
Taxable income before percentage depletion		95,438.							
65%		0.65							
65% of taxable income		62,035.							
Property Number	Property Description	Percentage Depletion 1st Iteration	Allocation Ratio	Limited Percentage Depletion	Cost Depletion	Percentage Depletion Final Iteration	Reallocation Ratio	Allowable Depl. after the 65% Limitation	Excess Percentage Depl. Carryover
1	J.R. PERRY CO.	204.	1.000000	204.		204.	1.000000	204.	
Total		204.	1.000000	204.		204.	1.000000	204.	

FORM 1040	TUITION AND FEES DEDUCTION	STATEMENT	1
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1. ENTER THE AMOUNT FROM FORM 1040, LINE 22. 122,143.
2. ENTER THE TOTAL OF THE AMOUNTS FROM FORM 1040, LINE 23
THROUGH LINE 25, LINES 27 THROUGH 33A, PLUS ANY AMOUNT
ENTERED ON THE DOTTED LINE NEXT TO LINE 34 64.
3. SUBTRACT LINE 2 FROM LINE 1. IF THE RESULT IS MORE THAN
\$65,000 (\$130,000 IF MARRIED FILING JOINTLY), YOU CANNOT
TAKE THE DEDUCTION FOR TUITION AND FEES 122,079.
4. TUITION AND FEES DEDUCTION. ENTER THE TOTAL QUALIFIED
TUITION AND FEES YOU PAID IN 2002. DO NOT ENTER MORE THAN
\$3,000. ALSO ENTER THIS AMOUNT ON FORM 1040, LINE 26. DO
NOT INCLUDE THIS AMOUNT IN FIGURING ANY OTHER DEDUCTION
ON YOUR RETURN (SUCH AS ON SCHEDULE A, C, E, ETC.) 3,000.

FORM 1040	IRA DISTRIBUTIONS	STATEMENT	2
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NAME OF PAYER	GROSS DISTRIBUTION	TAXABLE AMOUNT
- ROLLOVER	14,400.	0.
TOTAL TO FORM 1040, LINE 15	14,400.	0.

FORM 1040	WAGES RECEIVED AND TAXES WITHHELD	STATEMENT	3
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T S EMPLOYER'S NAME	AMOUNT PAID	FEDERAL TAX WITHHELD	STATE TAX WITHHELD	CITY SDI TAX W/H	FICA TAX	MEDICARE TAX
T OFFICE OF THE GOVERNOR	104,156.	17,129.			5,264.	1,611.
S BROADCAST TRAFFIC & RESIDUALS TALENT ACCT	87.				5.	1.
TOTALS	104,243.	17,129.			5,269.	1,612.

FORM 1040	FEDERAL INCOME TAX WITHHELD	STATEMENT	4
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T S DESCRIPTION	AMOUNT
T OFFICE OF THE GOVERNOR	17,129.
THE PHOENIX COMPANIES, INC	1.
THE PHOENIX COMPANIES, INC	8.
TOTAL TO FORM 1040, LINE 62	17,138.

SCHEDULE A	CASH CONTRIBUTIONS	STATEMENT	5
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DESCRIPTION	AMOUNT 50% LIMIT	AMOUNT 30% LIMIT
AUSTIN HIGH SCHOOL	50.	
BRENTWOOD BAPTIST CHURCH	100.	
TARRYTOWN UNITED METHODIST CHURCH	1,200.	
MT. HEBRON MISSIONARY BAPTIST CHURCH	100.	
PLEASANT GROVE BAPTIST CHURCH	100.	
FROM K-1 - J.R. PERRY CO.	66.	
SUBTOTALS	1,616.	
TOTAL TO SCHEDULE A, LINE 15		1,616.

SCHEDULE D	NET SHORT-TERM GAIN OR LOSS FROM PARTNERSHIPS, S CORPORATIONS, AND FIDUCIARIES	STATEMENT	6
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DESCRIPTION OF ACTIVITY	GAIN OR LOSS
REVOCABLE "BLIND" TRUST STATE AGREEMENT FBO RICK PERRY DTD 9-13-	6,633.
TOTAL TO SCHEDULE D, PART I, LINE 5	6,633.

SCHEDULE D		NET LONG-TERM GAIN OR LOSS FROM PARTNERSHIPS, S CORPORATIONS, AND FIDUCIARIES	STATEMENT 7
DESCRIPTION OF ACTIVITY		GAIN OR LOSS	28% GAIN
REVOCABLE "BLIND" TRUST STATE AGREEMENT FBO RICK PERRY DTD 9-13-		<18,830.>	<18,830.>
TOTAL TO SCHEDULE D, PART II, LINE 12		<18,830.>	<18,830.>

SCHEDULE D	CAPITAL LOSS CARRYOVER	STATEMENT	8
1. ENTER THE AMOUNT FROM FORM 1040, LINE 39		107,234.	
2. ENTER THE LOSS FROM SCHEDULE D, LINE 18, AS A POSITIVE AMOUNT.		3,000.	
3. COMBINE LINES 1 AND 2. IF ZERO OR LESS, ENTER -0-		110,234.	
4. ENTER THE SMALLER OF LINE 2 OR LINE 3		3,000.	
5. ENTER THE LOSS FROM SCHEDULE D, LINE 7, AS A POSITIVE AMOUNT .			
6. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 16			
7. ADD LINES 4 AND 6			
8. SHORT-TERM CAPITAL LOSS CARRYOVER TO 2003. SUBTRACT LINE 7 FROM LINE 5. IF ZERO OR LESS, ENTER -0- . . .			
9. ENTER THE LOSS FROM SCHEDULE D, LINE 16, AS A POSITIVE AMOUNT.		31,188.	
10. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 7		6,622.	
11. SUBTRACT LINE 5 FROM LINE 4. IF ZERO OR LESS, ENTER -0-		3,000.	
12. ADD LINES 10 AND 11		9,622.	
13. LONG-TERM CAPITAL LOSS CARRYOVER TO 2003. SUBTRACT LINE 12 FROM LINE 9. IF ZERO OR LESS, ENTER -0- . .		21,566.	

SCHEDULE E	INCOME OR (LOSS) FROM ESTATES AND TRUSTS				STATEMENT	9
NAME	EMPLOYER ID NO.	PASSIVE LOSS	PASSIVE INCOME	NONPASSIVE LOSS	NONPASSIVE INCOME	
REVOCABLE "BLIND" TRUST STATE AGREEMENT FBO REVOCABLE "BLIND" TRUST AGREEMENT FBO ANITA PERRY	03-6092780		9,096.			
TOTALS TO SCHEDULE E, LINE 33			9,096.			

SCHEDULE SE	NON-FARM INCOME	STATEMENT	10
DESCRIPTION	AMOUNT		
FROM K-1	4,789.		
TOTAL TO SCHEDULE SE, LINE 2	4,789.		

FORM 8582

OTHER PASSIVE ACTIVITIES - WORKSHEET 3

STATEMENT 11

NAME OF ACTIVITY	CURRENT YEAR		PRIOR YEAR UNALLOWED LOSS	OVERALL GAIN OR LOSS	
	NET INCOME	NET LOSS		GAIN	LOSS
REVOCABLE "BLIND" TRUST STATE AGREEMENT FBO RICK PERRY DTD 9-	9,096.	0.		9,096.	
TOTALS	9,096.	0.		9,096.	

FORM 8582

SUMMARY OF PASSIVE ACTIVITIES

STATEMENT 12

R R E A NAME	FORM OR SCHEDULE	GAIN/LOSS	PRIOR YEAR C/O	NET GAIN/LOSS	UNALLOWED LOSS	ALLOWED LOSS
REVOCABLE "BLIND" SCH E TRUST STATE AGREEMENT FBO		9,096.		9,096.		
TOTALS		9,096.		9,096.		
PRIOR YEAR CARRYOVERS ALLOWED DUE TO CURRENT YEAR NET ACTIVITY INCOME						
TOTAL TO FORM 8582, LINE 16						

Tax Return Carryovers to 2003

NAME: JAMES R. & M. ANITA PERRY

ID Number:

[illegible]